

## FAQ Regarding Prospective Drug Utilization Review (proDUR) Edits on Antipsychotics

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- 1. What is a Prospective Drug Utilization Review (proDUR) edit?** A proDUR edit is a process in which a request for a drug product for a particular patient is screened for potential drug therapy problems before the product is dispensed. When the proDUR edits for the antipsychotic drugs are applied to a claim, the claim will deny if the age of the member falls below the set age (less than five years of age for risperidone and less than six years of age for all other antipsychotics) and will also deny if the member is on more than one antipsychotic medication. In order for the claim to process, a prior authorization (PA) must be submitted and approved.
- 2. Why are the Prospective Drug Utilization Review (proDUR) edits on antipsychotics drugs being implemented?** The overall goal is to improve the quality of care and enhance patient safety by reviewing for use according to the FDA-approved indications and dosages, and to discourage routine prescribing of two or more antipsychotic medications concurrently.
- 3. What antipsychotic medications require a Prior Authorization (PA) due to the proDUR edits?** A prior authorization (PA) would be required for the following antipsychotics:
  - Atypical antipsychotics include aripiprazole (Abilify), asenapine (Saphris), clozapine (Clozaril), iloperidone (Fanapt), lurasidone (Latuda), olanzapine (Zyprexa), paliperidone (Invega), quetiapine (Seroquel), risperidone (Risperdal) and ziprasidone (Geodon).
  - Typical antipsychotics include chlorpromazine, fluphenazine, haloperidol (Haldol), loxapine (Loxitane), perphenazine, trifluoperazine, thioridazine and thiothixene.when the member falls below the set age and/or if the member is on more than one antipsychotic medication.
- 4. How long does a Prior Authorization (PA) take?** The pharmacist reviewer will make a decision and respond within 24 hours of the request. Federal law requires Medicaid programs that utilize prior authorization programs to respond within 24 hours of a request for prior authorization. The average determination time for a PA request is currently four to five hours.
- 5. Who can request a Prior Authorization (PA)? How is a PA requested?** The prescriber requests prior authorizations. The process is a prescriber fax-only system using the forms provided by the Iowa Medicaid Enterprise. The

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prescriber must request prior authorization by faxing the designated Request for Prior Authorization form to 800-574-2515.

- 6. Do the proDUR edits apply to discharged hospitalized or institutionalized patients?** The IME encourages providers and discharge planners to request prior approval as part of the discharge planning process for hospitalized or institutionalized patients. Requests for prior approval should be initiated prior to discharge to ensure a smooth transition into the community.
- 7. Will antipsychotics be approved for children through Prior Authorization (PA) if the patient is under the FDA approved age range?** Antipsychotic dosing schedules are guided by the specific indication for use. The FDA-approved indications and dosages for antipsychotics will be followed. The drug prior authorization unit will consider other indications and dosages as listed in the compendia on an individual basis after reviewing documentation submitted regarding the medical necessity.
- 8. Will more than one antipsychotic be approved through Prior Authorization (PA) for a child? For an Adult?** Requests for more than one antipsychotic, to be used concurrently, will only be considered for short-term use when the patient is transitioning from one antipsychotic to another. Documentation of the taper schedule should be included with the prior authorization request. Long-term, concomitant use of multiple antipsychotics will not be authorized.
- 9. What if the patient needs his/her antipsychotic medication(s) right away? Will the patient have to immediately stop one or more of the medications?** The multiple notifications to prescribers in advance of implementation of the proDUR edit are to allow time for the prescriber to make changes to the drug regimen or submit a PA request. The provider should not wait for the patient's claims to hit a prior approval edit at the pharmacy and should proceed with his/her request as soon as possible. Once the edit is in place, consideration will be made for short-term transitions in therapy.
- 10. Who should a prescriber contact if they have Prior Authorization (PA) questions?** The prescriber may call the PA Provider Help Desk (256-4607 for local or 877-776-1567) for assistance with PA criteria or forms.